



FILED IN THE
JANUARY DISTRICT COURT
DISTRICT OF HAWAII

Department of the Treasury
Federal Law Enforcement Agencies
PROCESS RECEIPT AND RETURN

JUL 12 2007

at 10 o'clock and 10 min. A.M.
SUE BENA CLERK

PLAINTIFF UNITED STATES		COURT CASE NUMBER Cr. No. 05-00189 DAE	
DEFENDANT KEITH SEICHI IMAI		TYPE OF PROCESS Preliminary Order of Forfeiture	
SERVE AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE DEPARTMENT OF HOMELAND SECURITY		
	ADDRESS (Street or RFD, Apartment No., City, State and Zip Code)		
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW		NUMBER OF PROCESS TO BE SERVED IN THIS CASE	
Rachel S. Moriyama Assistant U.S. Attorney 300 Ala Moana Boulevard, Rm 6-100 Honolulu, Hawaii 96850-6100		NUMBER OF PARTIES TO BE SERVED IN THIS CASE	
		CHECK BOX IF SERVICE IS ON USA	
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE. (Includes Business and Alternate Addresses, Telephone Numbers, and Estimated Times Available For Service): Please publish notice.			
Signature of Attorney or other Originator requesting service on behalf of RACHELS. MORIYAMA		<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NO. (808) 541-2850 DATE May 3, 2007
SIGNATURE AND DATE OF PERSON ACCEPTING PROCESS: Nanette S. Sarapua 05-04-07			
SPACE BELOW FOR USE OF TREASURY LAW ENFORCEMENT AGENCY			
I acknowledge receipt for the total number of process indicated. 1	District of Origin No. 32	District to Serve No. 32	SIGNATURE OF AUTHORIZED TREASURY AGENCY OFFICER. DATE 5/4/07
I HEREBY CERTIFY AND RETURN THAT I <input checked="" type="checkbox"/> PERSONALLY SERVED, <input type="checkbox"/> HAVE LEGAL EVIDENCE OF SERVICE, <input checked="" type="checkbox"/> HAVE EXECUTED AS SHOWN IN REMARKS, THE PROCESS DESCRIBED ON THE INDIVIDUAL, COMPANY, CORPORATION, ETC., AT THE ADDRESS SHOWN ABOVE OR ON THE ADDRESS INSERTED BELOW.			
<input type="checkbox"/> I HEREBY CERTIFY AND RETURN THAT I AM UNABLE TO LOCATE THE INDIVIDUAL, COMPANY, CORPORATION, ETC. NAMED ABOVE.			
NAME & TITLE OF INDIVIDUAL SERVED IF NOT SHOWN ABOVE:		<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.	
ADDRESS: (Complete only if different than shown above)		DATE OF SERVICE	TIME OF SERVICE <input type="checkbox"/> AM <input type="checkbox"/> PM
		SIGNATURE, TITLE AND TREASURY AGENCY DHS CBP FP&F Officer Lisa Young	
REMARKS: The notice was published in the Honolulu Star Bulletin on May 24, May 31 and June 7, 2007. The original affidavit of publication is attached.			